## PART B -FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

for maintenance fee notifi	cations.		,		, (0)	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  CONNOLLY BOVE LODGE & HUTZ, LLP P.O. BOX 2207  WILMINGTON, DE 19899				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
						(Depositor's name) (Signature)
						(Signature)
APPLICATION NO.	FILING DATE	FIRST NAM	ED INVENT	OR	ATTORNEY DOCKET NO	
10/560,861	03/07/2006		Richard O'Dell		14113-00027-US	2089
TITLE OF INVENTION	N: ALKYLENEDIO	DXYTHIOPHENES AND P	OLY(ALKY)	LENEDIOXYT	THIOPHENES) CONTAINII	NG MESOGENIC GROUPS
APPLN, TYPE	SMALL ENTITY	ISSUE FEE	PUBLICA	ATION FEE	TOTAL FEE(S) DUE	DATE DUE
Non-Provisional	no	\$1,510.00	\$30	00.00	\$1,810.00	06/01/2010
EXAMINER		ART UNIT				
Listvoyb, Gregory 1  1. Change of correspondence address or indication of "Fee		1796		008000 ent front page, l	• ,	
Correspondence  "Fee Address" in form PTO/SB/47  Use of a Custom  3. ASSIGNEE NAME A  PLEASE NOTE: Unle	espondence address (o Address form PTO/SB/1 dication (or "Fee Address"; Rev 03-02 or more receier Number is required AND RESIDENCE DAT as an assignee is identificated in 37 CFR 3.11. Confee	(1) the na attorneys or (22) attached. ss" Indication ent) attached. A TO BE PRINTED ON Thed below, no assignee data will be attorneys or (2) the name a registered up to 2 reginame is list.	ames of up ragents OR, a se of a single 1 attorney or istered patent ed, no name value PATENT will appear on T a substitute	to 3 registered lternatively, firm (having as a agent) and the attorneys or agovill be printed.  (print or type)  the patent. If a for filling an as CE: (CITY and	a member 2 names of ents. If no 3	Bove Lodge & Hutz LLP  w, the document has been filed
		ories (will not be printed on the	patent):	Individual	X Corporation or other priva	te group entity Government
4a. The following fee(s) are enclosed:  4b. Payment of I				` '		
X Issue Fee A check in the amo				ount of the fee(s	s) is enclosed.	
X         Publication Fee (No small entity discount permitted)         X         Payment by credit card.						
Advance Order -# of Copies  X The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-2775						
	ns SMALL ENTITY sta	tus. See 37 CFR 1.27.	<u> </u>			status. See 37 CFR 1.27(g)(2).
NOTE: The Issue Fee and I	Publication Fee (if require				viously paid issue fee to the ap nt; a registered attorney or age	plication identified above, ent; or the assignee or other party in
Authorized Signature /Ashley I.		/Ashley I. Pezzner/			Date	May 21, 2010
Typed or printed name Ashley I. Pezzner				Registration No.	35,646	